

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	BA		04-30-01
O.I.P.E. CLASSIFIER	ca	245	5/20
FORMALITY REVIEW	HB	5C-96	06-01-01
RESPONSE FORMALITY REVIEW	L-I	1106	10/16/01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final	
Original	
1	1-34-01
2	2-10-01
3	2-10-01
4	2-10-01
5	2-10-01
6	2-10-01
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42	2-10-01
43	2-10-01
44	2-10-01
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46	2-10-01
47	2-10-01
48	2-10-01
49	2-10-01
50	2-10-01

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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10/16